Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under:	
	Chapter 7 Chapter 11	
	☐ Chapter 12 ☐ Chapter 13	Check if amended

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself						
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1. Your full name	Dominique First name	First name				
Write the name that is on your government-issued picture identification (for example, your driver's	Middle name Graves	Middle name				
license or passport	Last name	Last name				
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)				
2. All other names you						
have used in the	First name	First name				
last 8 years Include your married or	Middle name	Middle name				
maiden names.	Last name	Last name				
	First name	First name				
	Middle name	Middle name				
	Last name	Last name				
3. Only the last 4 digits of your	XXX - XX- <u>7442</u>	xxx - xx-				
Social Security number or federal	OR	OR				
Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-				

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De	First Name	Middle Name	Graves Last Name	Case number (if kr	10Wn)	
	First Name	iviladie Name	Last Name			
		About Debtor 1:		About Deb	tor 2 (Spouse Onl	y in a Joint Case):
4.	Any business names and Employer	I have not used any busine	ss names or EINs.	I have no	ot used any business nam	nes or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business na	ame	
last 8 years Include trade names and doing business as names		Business name		Business na	ame	
		EIN		EIN		
		EIN		EIN		
5.	Where you live	8509 S. Exchange Avenue Apt. 2		If Debtor 2 li	ives at a different addı	ress:
		Number Street	•	Number	Street	
		Chicago Illinois	60617	_		
		City State	Zip Code	City	State	Zip Code
		Cook		-		
		County		County		
		If your mailing address is diff	ferent from the one above,	If Debtor 2's r	mailing address is diffe	erent from yours, fill it
		fill it in here. Note that the coun	t will send any notices to you at			ny notices to this mailing
		this mailing address.		address.		
		Number Street		Number	Street	_
				_		
		City	7in Code			
_		City State	Zip Code	City	State	Zip Code
6.	Why you are	Check one:		Check one:		
	choosing this district to file for	✓ Over the last 180 days before	ore filing this petition, I have	Over the	last 180 days before filin	na this netition. I have
	bankruptcy	lived in this district longer t			his district longer than in	
		☐ I have another reason. Exc	olain. (See 28 U.S.C. §§ 1408.)	☐ I have an	nother reason. Explain. (S	See 28 U.S.C. §§ 1408.)
			(200 20 0.0.0. 33 . 100.)		.ou.o. rouco <u>_</u> z,p.u (c	200 20 0.0.0. 3300./
				-		_
				-		

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Dei	otor 1 Dominique	Graves Case number (if known) Middle Name Last Name
Par	First Name 12: Tell the Court Abo	Middle Name Last Name ut Your Bankruptcy Case
	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13
	How you will pay the fee	 ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ✓ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ✓ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.
	Have you filed for bankruptcy within the last 8 years?	✓ Yes. District Northern District of Illinois When MM / DD / YYYY Case number MM / DD / YYYY District When MM / DD / YYYYY Case number Case number MM / DD / YYYYY
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor Relationship to you District When Case number, if known Debtor Relationship to you District When Case number, if known Case number, if known MM / DD / YYYY
	Do you rent your residence?	 No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. ☐ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.

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Debtor 1 Do	ominique st Name		Midd		Graves Last Name	Case number (if kno	own)	
		, Bus		es You Own as a S				
12. Are you propriet full- or busine A sole properate individual a separate entity separaters. If you had than on propriet separate.	part-time ss? proprietorship siness you as an ial, and is not ate legal uch as a tion, ship, or LLC. have more e sole corship, use a e sheet and t to this		No.	Go to Part 4. Name and location of both statements are statements and location of both statements and location of both statements are statements and location of both statements and location of both statements are statements and location of both statements are statements and location of both statements are statements. The location of both statements are statements and location of both statements are statements and location of both statements are statements and location of both statements are statements an	Street Street box to describe you siness (as defined in 21 U.S.C. ker (as defined in 11	111 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51B)) § 101(53A))	Zip Code	
Chapte Bankru and are busine For a d small b	see 11 U.S.C.	deadl opera	ines. If y tions, ca C. § 11 1 No.	ou indicate that you are a ash-flow statement, and 6(1)(B). I am not filing under Ch I am filing under Chapt Bankruptcy Code.	a small business deb federal income tax re napter 11. eer 11, but I am NOT	ether you are a small busin tor, you must attach your m eturn or if any of these docu a small business debtor ac	nost recent balance suments do not exist, ccording to the defin	sheet, statement of follow the procedure in 11
Part 4: Re	port if You Ow	n or I	lave A	Any Hazardous Pro	operty or Any P	roperty That Needs	Immediate Atto	ention
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate				What is the hazard? If immediate attention is a Where is the property?	needed, why is it nee	ded? Street		
For exa own pe or lives be fed,	on? mple, do you rishable goods, tock that must or a building eds urgent				City	State		Zip Code

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Debtor 1 Dominique Graves Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in

a military combat zone.

If you believe you are not required to receive a briefing

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

a military combat zone.

If you believe you are not required to receive a briefing

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

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Debtor 1 Dominique		Graves Case number (if knowl	n)			
Part 6: Answer These Qu	uestions for Reporting Purpos					
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be availa No. Yes.	or 7. Go to line 18. Do you estimate that after any exempt property is able to distribute to unsecured creditors?	s excluded and administrative expenses are			
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000			
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Part 7: Sign Below						
For you	and correct. If I have chosen to file under Common to file under Common to file under Common to file under Common to file under Chapter to file under Chapter to file under the file under the file understand making a false state.	and I did not pay or agree to pay some ve obtained and read the notice requir with the chapter of title 11, United Statement, concealing property, or obtaicase can result in fines up to \$250,000 52, 1341, 1519, and 3571.	eed, if eligible, under Chapter 7, vailable under each chapter, and I eone who is not an attorney to help ed by 11 U.S.C. § 342(b). tes Code, specified in this petition. ining money or property by fraud in 0, or imprisonment for up to 20			

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Debtor 1 Dominique		Graves	Case number	(if known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one If you are not represented by an	eligibility to proceed und the relief available unde to the debtor(s) the notic certify that I have no kno	er Chapter 7, 11, 12, or r each chapter for whice required by 11 U.S.C	r 13 of title 11, U ch the person is C. § 342(b) and, i	that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the
attorney, you do not	petition is incorrect.			
need to file this page.	/s/ Angie Harb Signature of Attorney for	r Debtor	Date	10/4/2016 MM / DD / YYYY
	Angie Harb			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	Chicago	III	inois	60603
	City	S	ate	Zip Code
	Contact phone		Email address	aharb@semradlaw.com
			Illin	ois
	Bar number		Stat	

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Fill in this information to identify your case:						
Debtor 1	Dominique	Graves				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)			(State)			

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$2,005.00
1c. Copy line 63, Total of all property on Schedule A/B	\$2,005.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$22,781.00
Your total liabilities	\$22,781.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,716.42
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$1,491.00

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De	btor 1	Dominique		Graves	Case n	umber (if known)	
		First Name	Middle Name	Last Name			
Par	t 4:	Answer These Questi	ions for Administra	tive and Statistical R	ecords		
6. /	Are you	u filing for bankruptcy un	der Chapters 7, 11, or 13	3?			
	_		t on this part of the form. C	check this box and submit thi	is form to the co	urt with your other schedul	es.
	✓ Ye	9S. 					
7. \	What k	ind of debt do you have	?				
				er debts are those incurred b tt lines 8-10 for statistical pu			
		our debts are not primarily is form to the court with you	•	nave nothing to report on this	s part of the form	a. Check this box and subm	iit
8.		the Statement of Your C 122A-1 Line 11; OR, Form 1	•	: Copy your total current mor 22C-1 Line 14.	nthly income fro	m Official	\$1,708.20
9.	Сор	y the following special ca	tegories of claims from	Part 4, line 6 of Schedule	E/F:		
	Fron	n Part 4 on Schedule E/F,	copy the following:			Total claim	
	9a. [Domestic support obligations	s (Copy line 6a.)			\$0.00	
	9b. T	axes and certain other debts	s you owe the government.	(Copy line 6b.)		\$0.00	
	9c. C						
	9d. S						
		Obligations arising out of a sity claims. (Copy line 6g.)					
	9f. D						
	9a. 1	Fotal. Add lines 9a through	9f.		Ī	\$8 784 00	

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FIII III II II II II	information to identity your c	ase.			
Debtor 1	Dominique First Name	Middle	Graves Name Last Name		
Dobtor 2	First Name	Middle I	Name Last Name		
Debtor 2 (Spouse, i	if filing) First Name	Middle I	Name Last Name		
United Sta	ates Bankruptcy Court for the	: Northern	District of Illinois (State)		
Case num (If known)	nber		(State)		
Officia	al Form 106A/B				Check if this is an amended filing
Sche	dule A/B: Prop	erty			12/1
category v responsib write your	vhere you think it fits best. le for supplying correct in name and case number (if	Be as complete an formation. If more sknown). Answer ex	t an asset only once. If an asset fits in mo ad accurate as possible. If two married pe space is needed, attach a separate sheet very question. Land, or Other Real Estate You (eople are filing together, both t to this form. On the top of a	h are equally any additional pages,
	, •	equitable interest i	n any residence, building, land, or similar	property?	
\checkmark	No. Go to Part 2				
1.1	Yes. Where is the property? Street address, if available,	or other description	What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	the amount of any s	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property. the Current value of the portion you own?
	Number Street	7in Codo	Land Investment property Timeshare Other	interest (such as	ure of your ownership fee simple, tenancy by a life estate), if known.
	City State	Zip Code	Who has an interest in the property? (one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check (see instructi	is community property ions)
			Other information you wish to add abo	out this item, such as local	
.,			property identification number:	·	
1.2	Street address, if available, Number Street		What is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any s Creditors Who Har Current value of entire property?	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property. the Current value of the portion you own? ure of your ownership
	City State	Zip Code	Timeshare Other	interest (such as the entireties, or	fee simple, tenancy by a life estate), if known.
			Who has an interest in the property? (one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add aborroperty identification number:	Check (see instructi	is community property ions)

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Debtor	1 Dominique First Name	Middle Name	Graves Last Name	Case number	(if known)	
1.3 _ S	treet address, if available, or othe		hat is the property? Check all that appl Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	y.	Do not deduct secured cl the amount of any secure Creditors Who Have Cla Current value of the entire property?	·
_	umber Street ity State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee sinthe entireties, or a life of the entireties).	mple, tenancy by
		Cti	ho has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add about operty identification number:		Check if this is cor (see instructions)	nmunity property
		on you own for all	of your entries from Part 1, including			
you owr 3. Cars,		uitable interest in ease a vehicle, also	any vehicles, whether they are registed report it on Schedule G: Executory Controlles			
3.	Model: Year:	Chevy Malibu 2002	Who has an interest in the property one. Debtor 1 only	y? Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	•
	Approximate mileage: 2 Other information: 2002 Chevy Malibu	211000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ano Check if this is community propinstructions)		Current value of the entire property? \$525.00	Current value of the portion you own? \$525.00
3.	2 Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	ther	Do not deduct secured of the amount of any secure Creditors Who Have Clater Current value of the entire property?	•
			Check if this is community proprinstructions)	erty (See		

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Other information: Debtor 1 and Debtor 2 only entire property? portion you or	Debtor 1	Dominique First Name	Middle Name	Graves Case nur	mber (if known)	
Model: Year: Approximate mileage: Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) At least one of the debtors and another Check if this is community property (see instructions) At least one of the debtors and another Check if this is community property (see instructions) No	3.3	Model: Year: Approximate mileage:		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	the amount of any security of the Creditors Who Have Current value of the entire property?	ecured claims on Schedule D: e Claims Secured by Property.
Instructions) Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes 4.1 Make Model: Year: Approximate mileage: Other information: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Current value of the entire property? Do not deduct secured claims or exempting the amount of any secured claims or exempting the entire property? Current value of the entire property? Do not deduct secured claims or exempting the amount of any secured claims or exempting the amount of any secured claims on Schematic Content value of the entire property? At least one of the debtors and another Debtor 1 only Approximate mileage: Debtor 2 only Other information: Debtor 1 and Debtor 2 only Current value of the entire property? Current value of the entire property?	3.4	Model: Year: Approximate mileage:		one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any se Creditors Who Have Current value of t	ecured claims on Schedule D: e Claims Secured by Property.
Approximate mileage: Other information: Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Year: Approximate mileage: Other information: Debtor 1 only Approximate mileage: Other information: Debtor 2 only Who has an interest in the property? Check one. Do not deduct secured claims or exempting the amount of any secured claims on Schematic Creditors Who Have Claims Secured by Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Current value of the entire property? Current value of the entire property? Current value of the entire property?	Exa	mples: Boats, trailers, motors, p No Yes Make Model:	•	ishing vessels, snowmobiles, motorcycle access Who has an interest in the property? Chec	sories k Do not deduct secur the amount of any se	ecured claims on Schedule D:
Model: Year: Debtor 1 only Approximate mileage: Debtor 2 only Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see		Approximate mileage:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Current value of t entire property?	, ,
Other information: Debtor 2 only Current value of the entire property? At least one of the debtors and another Check if this is community property (see	4.2	Model: Year:		one. Debtor 1 only	the amount of any se	ecured claims on Schedule D:
				Debtor 1 and Debtor 2 only At least one of the debtors and another	entire property?	he Current value of the portion you own?
5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$525.00	5. Add	the dollar value of the portion	on you own for all o	,	tries for pages	\$525.00

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D	ebtor 1	Dominique		Graves	Case number (if known)	
		First Name		Last Name		
			our Personal and Household Items	n any of the follow	ving items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		_	s and furnishings bliances, furniture, linens, china, kitchenware			
✓	Yes. D	escribe	used furniture			\$600.00
	7. Electi Examp		s and radios; audio, video, stereo, and digital equ	uipment; computers, prin	ters, scanners; music	
✓	Yes. D	escribe	cellphone, tv			\$350.00
	Examp	•	lue and figurines; paintings, prints, or other artwork; loin, or baseball card collections; other collections	•	-	
¥	4	escribe				
	Equip	oment for sp	orts and hobbies notographic, exercise, and other hobby equipments; carpentry tools; musical instruments	t; bicycles, pool tables, g	jolf clubs, skis; canoes	
✓	No					
	Yes. D	escribe				
	No		les, shotguns, ammunition, and related equipmer	nt		
1	11. Clot Examp		clothes, furs, leather coats, designer wear, shoes	s, accessories		
L	No					7
⊻	Yes. L	escribe	used clothing			\$250.00
	12. Jewe Examp	•	ewelry, costume jewelry, engagement rings, weder	ding rings, heirloom jewe	elry, watches, gems,	
✓	Yes. D	escribe	used jewelry			\$100.00
	Examp No	-farm anima les: Dogs, ca Describe	is, birds, horses			
,	14. Anv	other person	nal and household items you did not already	list. including any heal	Ith aids you did not list	1
	No	Janor person		,	alao you ala flot list	
Ė		escribe				
			alue of all of your entries from Part 3, includir		es you have attached	\$1300.00

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Den	Timi Name	Medalla Massa	Glaves	Case number (ii known)	
Part	First Name Pescribe Your	Middle Name r Financial Assets	Last Name		
		any legal or equitable int	erest in any of the fol	lowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	✓ No	ave in your wallet, in your home, in a			
17.	Deposits of money Examples: Checking,		; certificates of deposit; share	Cash:s in credit unions, brokerage houses, list each.	
		17.1. Checking account:			_
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:	-		- -
		17.5. Certificates of deposit:			
		17.6. Other financial account:	netspend		\$179.00
		17.7. Other financial account:	emerald card		\$1.00
		17.8. Other financial account:	-		<u> </u>
		17.9. Other financial account:			
18.		s, or publicly traded stocks	o firmo, monou market accoun	ato.	
	No No	s, investment accounts with brokerag	e IIIIIs, Money Market accour	ilS	
	Yes	Institution or issuer name:			
19.	an LLC, partnership		ated and unincorporated bu	usinesses, including an interest in	•
	✓ No Yes. Give specific information about them			% of ownership:	

Official Form 106A/B Schedule A/B: Property page 5

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Deb	tor 1	Dominique		Graves	Case number (if known)	
		First Name	Middle Name	Last Name		
20.	Neg Nor	otiable instruments ir	orate bonds and other negotial nelude personal checks, cashiers' conts are those you cannot transfer to	checks, promissory notes, and mo	ney orders.	
		Yes. Give specific information about them	Issuer name:			
21.		irement or pension				
	Exa	mples: Interests in IR No	RA, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other p	ension or profit-sharing plans	
		Yes. List each	Type of account:	Institution name:		
		account separately.	401(k) or similar plan:			
		ooparatory.	Pension plan:		-	
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
22.	You Exa		orepayments deposits you have made so that you with landlords, prepaid rent, public			
	✓	No		Institution name:		
		Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			
			Prepaid rent:			
			Telephone:		-	
			Water:		-	
			Rented furniture:		-	
			Other:			
23.	Anr	•	r a periodic payment of money to yo	ou, either for life or for a number of	years)	
		No Yes	Issuer name and description:			
					-	

Official Form 106A/B Schedule A/B: Property page 6

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Debt	or 1 Dominique First Name	Middle N		Graves .ast Name	Case number (if known)	
24.	Interests in an educ		ount in a qualified A		a qualified state tuition program	
	No Instituti	ion name and descripti	ion. Separately file the	records of any interests.11	U.S.C. § 521(c):	
25.			roperty (other than a	anything listed in line 1),	and rights or powers	
	exercisable for your No	benefit				
	Yes. Describe					
26.	Patents, copyrights, Examples: Internet do			ellectual property ies and licensing agreemer	nts	
	✓ No					7
	Yes. Describe					
27.	Licenses, franchises Examples: Building pe			ciation holdings, liquor lice	nses, professional licenses	
	✓ No Yes. Describe					7
	Tee: Deconoc					
Mor	ney or property o	wed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	ney or property o	·				portion you own? Do not deduct secured
	Tax refunds owed to	you			Foderal:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to No Yes. Give specific about them,	you information including whether			Federal:	portion you own? Do not deduct secured claims or exemptions. \$0.00
	Tax refunds owed to No Yes. Give specific about them,	you information including whether filed the returns			State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to No Yes. Give specific about them, you already and the tax y	you information including whether filed the returns vears	pueal support, child su	oport maintenance diverse	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to No Yes. Give specific about them, you already and the tax y Family support Examples: Past due or	you information including whether filed the returns vears	ousal support, child su	oport, maintenance, divorce	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to No Yes. Give specific about them, you already and the tax y	you information including whether filed the returns vears	ousal support, child su	oport, maintenance, divorce	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to No Yes. Give specific about them, you already the and the tax y Family support Examples: Past due or	you information including whether filed the returns vears	ousal support, child su	oport, maintenance, divorce	State: Local: e settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to No Yes. Give specific about them, you already the and the tax y Family support Examples: Past due or	you information including whether filed the returns vears	ousal support, child su	oport, maintenance, divorce	State: Local: e settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to No Yes. Give specific about them, you already the and the tax y Family support Examples: Past due or	you information including whether filed the returns vears	ousal support, child su	oport, maintenance, divorce	State: Local: e settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to No Yes. Give specific about them, you already the and the tax y Family support Examples: Past due or	you information including whether filed the returns vears	ousal support, child su	oport, maintenance, divorce	State: Local: e settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to ✓ No Yes. Give specific about them, you already the tax you already the tax you support and the tax you support Examples: Past due or Yes. Give specific Other amounts some Examples: Unpaid wag	you information including whether filed the returns years	e payments, disability l	penefits, sick pay, vacation p	State: Local: e settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to ✓ No Yes. Give specific about them, you already the tax you already the tax you support and the tax you support Examples: Past due or Yes. Give specific Other amounts some Examples: Unpaid wag	you information including whether filed the returns years	e payments, disability l	penefits, sick pay, vacation p	State: Local: e settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to ✓ No Yes. Give specific about them, you already and the tax you already and the tax you support Examples: Past due or ✓ No Yes. Give specific Other amounts some Examples: Unpaid wag Social Sect	you information including whether filed the returns years	e payments, disability l	penefits, sick pay, vacation p	State: Local: e settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Dominique	Graves	Case number (if known)	
	First Name Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; hea	alth savings account (HSA); credit, ho	meowner's, or renter's insurance	
	✓ No Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from a lif you are the beneficiary of a living trust, expect p property because someone has died. No Yes. Describe		r are currently entitled to receive	
33.	Claims against third parties, whether or not y Examples: Accidents, employment disputes, insur		demand for payment	
34.	Yes. Describe Other contingent and unliquidated claims of	every nature, including counterc	aims of the debtor and rights	
	to set off claims No		_	
	Yes. Describe			
35.	Any financial assets you did not already list			
	✓ No Yes. Describe			
36.	Add the dollar value of all of your entries from for Part 4. Write that number here			\$180.00
Part	5: Describe Any Business-Related P Do you own or have any legal or equitable int			n Part 1.
31.		erest in any business-relateu prop		urront volue of the
	No. Go to Part 6. Yes. Go to line 38.		po Do	urrent value of the ortion you own? onot deduct secured claims exemptions
38.	Accounts receivable or commissions you alre	ady earned		
	✓ No			
	Yes. Describe			
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software	, modems, printers, copiers, fax mach	ines, rugs, telephones, desks, chairs, electror	nic devices
	✓ No Yes. Describe			

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Deb	tor 1	Dominique		Graves	Case number (if known)	
40.	Mər	First Name	Middle Name	Last Name se in business, and tools of ye	our trade	
7 ∪.			_{laikinein} , sukkies you u	oo iii budiiicoo, aliu toolo 01 y	our adde	
		No Yes. Describe				1
	ш	roo. Booonibo				
11	- Inve	onton.				
41.		entory				
		No Vos Doscribo				1
	ш	Yes. Describe				
40						
42.			ips or joint ventures			
		110	J	Name of entity:	% of ownership:	
	Ш	Yes. Give specific information about				
		them	-			
			-			
40.4	~ _4					_
43. (_	lists, or other compilation	ons		
			aluda naraanallu idantifiahl	a information (as defined in 11 LL	S.C. S.404/44A\\\2	
	Ш	res. Do your lists in	iciude personally identiliabl	e information (as defined in 11 U	.S.C. 9 101(41A))?	
		☐ No				
		Yes. Descr	ribe			
44.	Any	business-related p	property you did not alrea	ady list		
	✓	No				
		Yes. Give specific	•			
		information				
			•			
				art 5, including any entries for		
for P	art 5.	_				
Part	6:	Describe Any F If you own or have ar	Farm- and Commerc n interest in farmland, list it i	ial Fishing-Related Prop n Part 1.	erty You Own or Have an Interes	t In.
46.	Do	you own or have a	nny legal or equitable inte	erest in any farm- or commerci	al fishing-related property?	
	✓	No. Go to Part 7.				Current value of the portion you own?
		Yes. Go to line 47.				Do not deduct secured claims
<u>4</u> 7	Far	m animals				or exemptions
→1 .			oultry, farm-raised fish			
	V	No				
	Ħ	Yes. Describe				

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Deb	tor 1 Dominique	Middle Name	Graves	Case number (if known)	
40	First Name	Middle Name	Last Name		
48.	Crops-either growing	or narvested			
	✓ No				
	Yes. Describe				
	L				
49.	Farm and fishing equi	 oment, implements, machinery, fixtu	res, and tools of trade		
		,, ,			
	✓ No			i	
	Yes. Describe				
				'	
50.	Farm and fishing supp	lies, chemicals, and feed			
	✓ No				
	Yes. Describe				
51.	Any farm- and comme	cial fishing-related property you did	I not already list		
	✓ No				
	Yes. Describe				
				Г	
		of your entries from Part 6, includi			
tor Pa	art 6. Write that number	here			
Part		operty You Own or Have an I		id Not List Above	
53.		perty of any kind you did not already s, country club membership	/ list?		
		, country dub membership			
	✓ No				
	Yes. Give specific				
	information				
54. A	dd the dollar value of al	of your entries from Part 7. Write the	nat number here	>	
Part	8: List the Totals	of Each Part of this Form			
		_			
55. F	Part 1: Total real estate,	ine 2		▶	
56 r	part 2 total vehicles, line	5			
			\$525.00		
57. P	art 3: Total personal an	d household items, line 15	\$1300.00		
58. P	art 4: Total financial ass	ets, line 36	\$180.00		
59. F	Part 5: Total business-re	lated property, line 45	·		
		• •			
6U. F	art 6: Total farm- and f	shing-related property, line 52			
61. F	Part 7: Total other prope	rty not listed, line 54			
62. 1	Total personal property.	Add lines 56 through 61	\$2005.00		+ \$2005.00
	-		ψ2000.00	Copy personal property total ▶	1 ψ2003.00
			<u> </u>		\$200F 00
63 T	otal of all property on S	chedule A/B. Add line 55 + line 62			\$2005.00
JJ.	a p. oporty on o				

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Fill in this information to identify your case:						
Debtor 1	Dominique First Name	Middle Name	Graves Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	Northern	District of Illinois (State)			
Case number (If known)			(State)			

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	Part 1: Identify the Property You Claim as Exempt							
1.	I. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A	/B that you claim as e	exempt, fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: Chevy, Malibu, 2002, 2002 Chevy Malibu Line from Schedule A/B: 03	\$525.00	\$525.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)				
	Brief description: netspend Line from Schedule A/B: 17	\$179.00	\$179.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes	v3 years after that for ca						

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ebtor 1			Graves	Case number (if known)	
art 2:	Additional Page	e Name l	Last Name		
line	of description of the property and on Schedule A/B that lists this perty	Current value of the portion you own Copy the value from Schedule A/B		the exemption you claim one box for each exemption.	Specific laws that allow exemption
Line	f cription: emerald card from edule A/B: 17	\$1.00		\$1.00 of fair market value, up to any able statutory limit	735 ILCS 5/12-1001(b)
Line	f cription: used jewelry from edule A/B: 12	\$100.00		\$100.00 of fair market value, up to any able statutory limit	735 ILCS 5/12-1001(b)
Brief desc		\$250.00		\$250.00 of fair market value, up to any able statutory limit	735 ILCS 5/12-1001(b)
Brief desc		\$350.00		\$350.00 of fair market value, up to any able statutory limit	735 ILCS 5/12-1001(b)
	f cription: used furniture from	\$600.00		\$600.00 of fair market value, up to any able statutory limit	735 ILCS 5/12-1001(b)

Schedule A/B:

06

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				_		
Fill in	this information to identify your case	e:				
Debte	or 1 Dominique		Graves			
	First Name	Middle Name	Last Name			
Debte	or 2					
(Spot	use, if filing) First Name	Middle Name	Last Name			
Unite	d States Bankruptcy Court for the:	Northern	District of Illinois			
_			(State)			
Case (If kno	number					
Off	icial Form 106D			<u> </u>		Check if this is ar amended filing
Scl	hedule D: Credit	tors Who Ha	ve Claims Secui	red by Pro	perty	12/1
space			are filing together, both are equa e entries, and attach it to this forn			
1. I	Do any creditors have claims sec	ured by your property?				
- 1	✓ No. Check this box and submit	this form to the court with yo	our other schedules. You have nothing	g else to report on this fo	orm.	
į	Yes. Fill in all of the information	below.				
Part '	1: List All Secured Claims	i				
2.	List all secured claims. If a credito	r has more than one secure	ed claim, list the creditor separately	Column A	Column B	Column C
	for each claim. If more than one cre much as possible, list the claims in a			Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

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Fill i	n this inform	ation to identify your cas	e:					
Deb	tor 1	Dominique		Graves				
		First Name	Middle Name	Last Name				
	tor 2 buse, if filing	First Name	Middle Name	Last Name				
Unit	ed States Ba	ankruptcy Court for the:	Northern	District of Illinois (State)				
	e number nown)			· · ·				
Off	icial F	orm 106E/F			<u>_</u> _	Ch	eck if this is ar	n amended filing
Sc	hedu	le E/F: Cre	editors Who	Have Unsec	cured Claims			12/15
party 106A that a entric know	to any exe /B) and on are listed in es in the bo /n).	cutory contracts or un Schedule G: Executor Schedule D: Creditor oxes on the left. Attach	expired leases that could y Contracts and Unexpire s Who Hold Claims Secu	result in a claim. Also list ed Leases (Official Form 1 red by Property. If more s o this page. On the top of	and Part 2 for creditors with executory contracts on Sch 06G). Do not include any crepace is needed, copy the Party any additional pages, write	edule A/B editors with art you nee	: Property (On partially second it is partially second it is out, read, fill it out, read it is not the content of the content is not the content of the con	official Form cured claims number the
1.		editors have priority ur o to Part 2.	nsecured claims against y	ou?				
2.	listed, ident much as po Continuation	ify what type of claim it is ossible, list the claims in on Page of Part 1. If mor	s. If a claim has both priority	and nonpriority amounts, list g to the creditor's name. If yo particular claim, list the othe		priority and	d nonpriority ar	mounts. As
						Total claim	Priority amount	Nonpriority amount

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Debto		ves Case number (if known) Name	
Part 2	List All of Your NONPRIORITY Unsecured Claims	5	
3.	Do any creditors have nonpriority unsecured claims against you	1?	
]	No. You have nothing to report in this part. Submit this form to the	court with your other schedules.	
	✓ Yes.		
		order of the creditor who holds each claim. If a creditor has more t	
		claim listed, identify what type of claim it is. Do not list claims already in	
	f more than one creditor holds a particular claim, list the other creditor. Page of Part 2.	s in Part 3.If you have more than four priority unsecured claims fill out t	ne Continuation
	age of Fait 2.		Total claim
4.1	ALLNCE COL		
4.1	Nonpriority Creditor's Name	Last 4 digits of account number 7825	\$3,206.00
	Po Box 1267 Number Street	When was the debt incurred?1/1/2013	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Marshfield Wisconsin 54449 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	Collection; Collecting for ORIGINAL CREDITOR: 09	
	Yes	CHECKMATE REALTY	
4.0	CARITAL ONE DANKLING N	Other. SpecifyDEVELOPMENT	*
4.2	CAPITAL ONE BANK USA N Nonpriority Creditor's Name	Last 4 digits of account number	\$495.00
	PO BOX 85520	When was the debt incurred? 12/1/2012	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	RICHMOND Virginia 23285 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	✓ Other. Specify CreditCard	
	Yes		
4.3	City of Chicago Parking	Last 4 digits of account number	\$5,900.00
	Nonpriority Creditor's Name 121 N. LaSalle St # 107A		
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Chicago Illinois 60602	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	븜	that you did not report as priority claims	
	Check if this claim relates to a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No	✓ Other. Specify parking tickets	
	Yes		

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Debtor 1 Dominique Graves Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim COMNWLTH FIN** 4.4 \$415.00 Last 4 digits of account number ___ Nonpriority Creditor's Name 960 N MAIN STREET When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent SCRANTON 18508 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify **MEDICAL** Yes CONVERGENT OUTSOURCING 4.5 \$556.00 Last 4 digits of account number 7618 Nonpriority Creditor's Name When was the debt incurred? Po Box 9004 8/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent 98057 Renton Washington Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for |√| **✓** No ORIGINAL CREDITOR: Other. Specify COMCAST Yes 4.6 **CREDIT ACCEPTANCE** \$1,799.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 513 When was the debt incurred? 12/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent Southfield Michigan 48037 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 048 Automobile Other. Specify _ \checkmark

No Yes

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Debto		Graves Case number (if known)	
	First Name Middle Name I	Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Conti	inuation Page	
	After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
4.7	Department of Unemployment	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name 4519 W Main Street	When was the debt incurred?	
	Number Street	<u> </u>	
		As of the date you file, the claim is: Check all that apply. Contingent	
	Belleville Illinois 62226 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other. Specify overpayment of benefits	
	Is the claim subject to offset?	<u> </u>	
	Yes		
4.8	DEPT OF EDUCATION/NELN	Lord A Polito of account wound are	\$5.777.00
<u> </u>	Nonpriority Creditor's Name 121 S 13TH ST	Last 4 digits of account number 6044 When was the debt incurred? 3/1/2010	40,777.00
	Number Street	<u> </u>	
		As of the date you file, the claim is: Check all that apply.	
	LINCOLN Nebraska 68508	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	✓ Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts Other. Specify	
	✓ No	Other. Opecary	
	Yes		
4.9	DEPT OF EDUCATION/NELN Nonpriority Creditor's Name	Last 4 digits of account number5944	\$3,007.00
	121 S 13TH ST	When was the debt incurred? 3/1/2010	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	LINCOLN Nebraska 68508	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	✓ Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts Other. Specify	
	No	Carier. Specify	
	Yes		

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Debtor 1	Dominique	Graves	Case number (if known)
	First Name Middle Name	Last Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Cont	inuation Page	
1	After listing any entries on this page, number them beginn	ning with 4.5, foll	owed by 4.6, and so forth. Total claim
	WEBBNK/FHUT	Last 4 digi	s of account number 5699 <u>\$126.00</u>
<u>6</u>	Nonpriority Creditor's Name 3250 RIDGEWOOD ROA	•	the debt incurred? 7/1/2016
ı	Number Street	As of the d	ate you file, the claim is: Check all that apply.
-	SAINT CLOUD Minnesota 56303	Conting	gent
	SAINT CLOUD Minnesota 56303 City State Zip Code	Unliqui	dated
	Who incurred the debt? Check one. ✓ Debtor 1 only	Dispute	d
	Debtor 2 only	Type of NO	NPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	Student loans	loans
	At least one of the debtors and another		ions arising out of a separation agreement or divorce I did not report as priority claims
	Check if this claim relates to a community debt	Debts to	o pension or profit-sharing plans, and other similar
	s the claim subject to offset? √ No		Specify CreditCard
	Yes		

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				Case III	umber (ii known)	
rst Name	Mido	lle Name	Last Name			
ist Others to F	Be Notified Al	out a Debt That	You Already Li	sted		
tion agency is try y here. Similarly, i	ying to collect fro if you have more	om you for a debt you than one creditor for	ou owe to someone or any of the debts	else, list the ori that you listed i	ginal creditor in Parts 1 or 2, then list the collecti n Parts 1 or 2, list the additional creditors here. I	
ast						
me			On which entry i	n Part 1 or Part 2	2 did you list the original creditor?	
E. Marginal Way	#5		Line 4.5	of (Check	Part 1: Creditors with Priority Unsecured Claim	
umber Street			one): 		Part 2: Creditors with Nonpriority Unsecured Claims	
e	Washington	98168	Last 4 digits of a	ccount number	7618	
	State	Zip Code	_			
RIS & HARRIS LT	D					
			On which entry i	n Part 1 or Part 2	2 did you list the original creditor?	
JACKSON BLVD	S-400		Line 4.3	of (Check	Part 1: Creditors with Priority Unsecured Claim	
er Street				one):	Part 2: Creditors with Nonpriority Unsecured Claims	
AGO	Illinois	60604	Last 4 digits of a	ccount number		
	State	Zip Code	-			
ii i n t y	ais page only if y tion agency is try here. Similarly, o not have additionant ast E. Marginal Way er Street E. Street JACKSON BLVD er Street	Ist Others to Be Notified All Ist Others to Be Notified All Ist page only if you have others to Istion agency is trying to collect from Istion agency is try	Ist Others to Be Notified About a Debt That Ist Others to Be Notified About a Debt That Ist spage only if you have others to be notified about Ition agency is trying to collect from you for a debt you Ist y here. Similarly, if you have more than one creditor for Ist on thave additional persons to be notified for any Ist ast E. Marginal Way # 5 E. Marginal Way # 5 E. Marginal Way # 5 E. Washington 98168 State Zip Code RIS & HARRIS LTD JACKSON BLVD S-400 ET Street AGO Illinois 60604	Ist Others to Be Notified About a Debt That You Already Lines age only if you have others to be notified about your bankruptcy, for tion agency is trying to collect from you for a debt you owe to someone you here. Similarly, if you have more than one creditor for any of the debts on thave additional persons to be notified for any debts in Parts 1 or asst On which entry is E. Marginal Way # 5 er Street Washington 98168 State Zip Code RIS & HARRIS LTD On which entry is JACKSON BLVD S-400 er Street AGO Illinois 60604 Last 4 digits of a last 4 digits of	St Others to Be Notified About a Debt That You Already Listed It page only if you have others to be notified about your bankruptcy, for a debt that you be someone else, list the original your bankruptcy, for a debt that you see to someone else, list the original you have more than one creditor for any of the debts that you listed it onto have additional persons to be notified for any debts in Parts 1 or 2, do not fill out ast On which entry in Part 1 or Part 2 E. Marginal Way # 5 er Street On which entry in Part 1 or Part 2 Line 4.5 of (Check one): Dackson BLVD S-400 er Street JACKSON BLVD S-400 Entry in Part 1 or Part 2 Line 4.3 of (Check one): Last 4 digits of account number one): Line 4.3 of (Check one): Last 4 digits of account number one):	

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Debtor 1 Dominique Graves Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$8,784.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$13,997.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

\$22,781.00

6 j.

6j. Total. Add lines 6f through 6i.

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Fill in this information to identify your case:							
Debtor 1	Dominique		Graves				
	First Name	Middle Name	Last Name	<u>_</u>			
Debtor 2							
(Spouse, if filing) First Name		Middle Name	Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois				
(State)							
(If known)							

Official Form 106G

Check if this is an
amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company	y with whom you have th	ne contract or lease	State what the contract or lease is for
2.1	AMG Properties Name			Other, Other, 1 year residential lease
	8509 S Exchange Ave Number Street			r year residential rease
	Chicago City	Illinois State	60617 Zip Code	

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Fill in this info	ormation to identify your ca	ase:		
Debtor 1	Dominique		Graves	
20010.	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if fil	ing) First Name	Middle Name	Last Name	
United States	s Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case numbe (If known)	r			
. ,				Check if this is ar amended filing
Official	Form 106H			
Schedi	ule H: Your C	adebtors		12/15
1. Do you No	y question. have any codebtors? (If	you are filing a joint case, do	not list either spouse as a co	
Idaho, Lo	ouisiana, Nevada, New Me . Go to line 3.	u lived in a community pro exico, Puerto Rico, Texas, Wa spouse, or legal equivalent li	shington, and Wisconsin.)	ommunity property states and territories include Arizona, California,
	Yes. In which community	state or territory did you live?	? Fill i	n the name and current address of that person.
	Name of your spouse,	former spouse, or legal equiv	valent	
	Number Street			<u> </u>
	City	State	Zip Code	_
again as	a codebtor only if that	person is a guarantor or co	osigner. Make sure you ha	rour spouse is filing with you. List the person shown in line 2 ve listed the creditor on <i>Schedule D</i> (Official Form 106D), ule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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Fill in this	information to identif	y your case:						
Debtor 1	Dominique		Graves					
	First Name	Middle Name	Last Nam	ne	_	Chook if this is:		
Debtor 2	ng) First Name	5.6° 1.11 . 5.1			_	Check if this is:		
(Spouse, ii iiii	119) First Name	Middle Name	Last Nam	ie		An amended filing		
United States	Bankruptcy Court for the:	Northern	District of Illino		_	A supplement show expenses as of the		
Case number			(Stat	e)		, , , , , , , , , , , , , , , , , , , ,	3	
(If known)	-					MM / DD / YYYY		
Official	Form 106I							
Schedu	ıle I: Your Ind	come						12/15
	pages, write your na	ame and case number	, ,	Answer eve	ery question			
	II in your employment		Debtor 1			Debtor 2		
	formation.	Employment status	Employed Not Employed			Employed Not Employed		
If y jol	you have more than one							
att	tach a separate page with	Occupation						
	formation about additional nployers.	Occupation				_		
		Employer's name	Chicago Sec	urity				
Inc or	clude part time, seasonal,	Employer's address	1954 First St Suite 187 Number Street			Niverbase Office of		
se	elf-employed work.					Number Street		
	ccupation may include udent							
or	homemaker, if it applies.		Highland Park	Illinois	60035	City	State	Zip Code
			City	State	Zip Code	_		
		How long employed there?	3 months				_	
Estimate m you are sepa	arated.	Monthly Income date you file this form. If your than one employer, combined that the complex combines that the complex combines that the complex combines that the complex combines that the complex complex combines that the complex comple		for all employe				
		ry, and commissions (befor alculate what the monthly wag			\$1,895.14		_	
	ate and list monthly over		3.		+ \$0.00			

\$1,895.14

4. Calculate gross income. Add line 2 + line 3.

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Depto	L.I. Dominidae	AP LU AL	Giaves	Case number (if known)	
	First Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Cop	y line 4 here		4.	\$1,895.14		
	all payroll deductions:					
	Tax, Medicare, and Socia	al Security deductions	5a.	\$318.72		
	Mandatory contribution	•	5b.	\$0.00		
5c.	Voluntary contributions	for retirement plans	5c.	\$0.00		
	Required repayments of		5d.	\$0.00		
5e.	Insurance		5e.	\$0.00		
5f. l	Domestic support obliga	ations	5f.	\$0.00		
5g.	Union dues		5g.	\$0.00		
5h.	Other deductions. Speci	fy:	_ 5h. +	\$0.00 +		
6. Add +5h.	the payroll deductions.	Add lines 5a + 5b + 5c + 5d + 5e +5f	+ 5g 6.	\$318.72		
7. Cald	culate total monthly take	-home pay. Subtract line 6 from line 4	l. 7.	\$1,576.42		
8. List	all other income regular	ly received:				
	business, profession, or					
		h property and business showing grosessary business expenses, and the total		\$0.00		
8b.	Interest and dividends		8b.	\$0.00		
	dependent regularly reconcude alimony, spousal su	upport, child support, maintenance,		40.00		
	divorce settlement, and pro	• •	8c.	\$0.00		
	Unemployment compen	sation	8d.	\$0.00		
	Social Security		8e.	\$0.00		
 	Include cash assistance and assistance that you receive the Supplemental Nutrition subsidies	cance that you regularly receive d the value (if known) of any non-cash , such as food stamps (benefits under Assistance Program) or housing				
;	Specify: Food Assistance	Programs Income	8f.	\$140.00		
Ŭ	Pension or retirement in		8g.	\$0.00		
	•	Specify:		\$0.00 +		
9. Add	all other income Add line	es 8a + 8b + 8c + 8d + 8e + 8f +8g +	8h. 9. <u> </u>	\$140.00		
	culate monthly income. At the entries in line 10 for D	Add line 7 + line 9. Debtor 1 and Debtor 2 or non-filing spo	10. <u> </u>	\$1,716.42 +	=	\$1,716.42
Incl rela	ude contributions from an untives.	ributions to the expenses that you inmarried partner, members of your ho ready included in lines 2-10 or amount	ousehold, your depe	ndents, your roommates		
	ecify:	Today included in iii loo 2-10 or di llourii	o and dio not avalle	sio to pay expenses liste		. + \$0.00
						·
		column of line 10 to the amount in mary of Schedules and Statistical Sum				\$1,716.42
						Combined monthly income
13. Do	you expect an increase	or decrease within the year after yo	ou file this form?			
	Yes. Explain:					

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Fill in this infor	mation to identify your c	ase:				
			Graves			
Debtor 1	Dominique First Name	Middle Name				
Debtor 2				Check if this is:		
(Spouse, if filin	g) First Name	Middle Name	Last Name	An amended filin	g	
United States I	Bankruptcy Court for the	e: Northern	District of Illinois (State)	A supplement sh expenses as of the	owing post-petition chap ne following date:	oter 13
Case number (If known)			_	·	-	
(ii kilowii)				MM / DD / YYYY	,	
Official	Form 106J					
Schedu	le J: Your E	xnenses				12/1
		-			 	12/10
			e filing together, both are equally form. On the top of any additiona			
	swer every question.	a, attaon anomor onoc to the	ioniii on iilo top or any additiona	. pagee, whie year ha		
Part 1: Des	cribe Your House	hold				
1. Is this a joi	nt case?					
✓ No. Go	o to line 2					
Yes. D	oes Debtor 2 live in a	separate household?				
	□ No	·				
L		Cla Official Faces 400 LO Female	(O (- 11 h11-(D11	0		
			ses for Separate Household of Debto	or 2.		
2. Do you have dependents?		No				
Do not list D Debtor 2.		s. Fill out this information for ch dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age	Does dependent live with you? No.	
			Cillia	3 years	✓ Yes.	
	penses include	No				
expenses of than	proprie otrici	No				
yourself an dependent	d your \Box	Yes				
Part 2: Esti	mate Your Ongoin	ng Monthly Expenses				
-	of a date after the ban		you are using this form as a supp plemental Schedule J, check the	•	•	
	•	n-cash government assistance d it on Schedule I: Your Income	-		Your expe	enses
	or home ownership e		4.	\$286.00		
If not inc	luded in line 4:				·-	
4a. Real e	state taxes				4a	\$0.00
4b. Prope	4b.	\$0.00				
4c. Home		4c.	\$0.00			
4d. Home	owner's association or c		4d.	\$0.00		

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Graves Debtor 1 Dominique Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$75.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$70.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$300.00 7. 8. Childcare and children's education costs \$600.00 8. 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services \$25.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$55.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$55.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Dominique		Graves	Case number (if known)					
	First Name	Middle Name	Last Name						
21.Other.	. Specify:	21	\$0.00						
22. Calculate your monthly expenses.						\$1,491.00			
22a. A	dd lines 4 through 21.		\$0.00						
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2						\$1,491.00			
22c. Add line 22a and 22b. The result is your monthly expenses.									
23.Calcu	late your monthly net i	income.							
23a. Copy line 12 (your combined monthly income) from Schedule I.						\$1,716.42			
23b. Copy your monthly expenses from line 22 above.						\$1,491.00			
23c. Subtract your monthly expenses from your monthly income.						\$225.42			
The result is your monthly net income.					23c				
24. Do yo	ou expect an increase of	or decrease in your expense	es within the year after you	ı file this form?					
For e	vamnle do vou expect to	o finish paying for your car loar	within the year or do you ev	nect vour					
		se or decrease because of a n							
✓ N	lo								
	′es								
	Explain here:								

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Fill in this infor	mation to identify your cas	e:		
Debtor 1	Dominique		Graves	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filin	g) First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(State)	

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	elp you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary ar	nd schedules filed with this declaration and
	that they are true and correct.	a sonounce mou man and assurance and
×	/s/ Dominique Graves	x
	Signature of Debtor 1	Signature of Debtor 2
	Date 10/4/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

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Debt	ior 1	Dominious		Croves				
	.01 1	Dominique First Name	Middle Na	Graves Ime Last Nam	ie	-		
Debt (Spor		g) First Name	Middle Na	nme Last Nam	ie	-		
Unite	ed States E	Bankruptcy Court for the:	Northern	District of Illino	is			
Casa	e number			(Stat	e)	-		
(If kno						=		
Off	icial	Form 107				.		Check if this is amended filing
Sta	teme	ent of Financ	ial Affairs	for Individua	als Filin	a for Ba	nkruptcv	12/
	is neede	ed, attach a separate sh	eet to this form. On	people are filing togethe the top of any additiona and Where You Liv	ıl pages, write			orrect information. If moi nown). Answer every
1.		your current marital s		and where fou Liv	red Belore			
	Ма	rried						
	✓ Not	t married						
2.	During	the last 3 years, have yo	ou lived anywhere o	ther than where you live	now?			
	☐ No							
	✓ Yes	s. List all of the places you	lived in the last 3 year	rs. Do not include where y	ou live now.			
	Del	hand.						
	20.	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
	20.	otor 1:			_	as Debtor 1		
		9 S Essex Ave		there	_	as Debtor 1		there Same as Debtor 1
	754			From <u>01/2014</u>	_			there Same as Debtor 1 From
	754	9 S Essex Ave mber Street		there	Same a			there Same as Debtor 1
	754 Nur Chi	9 S Essex Ave mber Street cago Illinois	60617 Zip Code	From <u>01/2014</u>	Same a	eet	Zin Code	there Same as Debtor 1 From
	754 Nur	9 S Essex Ave mber Street cago Illinois	60617 Zip Code	From <u>01/2014</u>	Same a		Zip Code	there Same as Debtor 1 From
	754 Nur <u>Chi</u> City	9 S Essex Ave mber Street cago Illinois / State		From <u>01/2014</u> To <u>01/2015</u>	Same a	State as Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1
	754 Nur <u>Chi</u> City	9 S Essex Ave mber Street cago Illinois		From 01/2014 To 01/2015 From	Same a	State as Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From
	754 Nur <u>Chi</u> City	9 S Essex Ave mber Street cago Illinois / State		From <u>01/2014</u> To <u>01/2015</u>	Same a	State as Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Deb	tor 1		Grav e Name Last	ves Case r	number (if known)	
D1	_	1		name		
Part		Explain the Sources of Your				
	Fill i	you have any income from employn n the total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details.	ed from all jobs and all bus	inesses, including part-time		ears?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		rom January 1 of current year until ne date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$7500.00	Wages, commissions, bonuses, tips Operating a business	
		or last calendar year: lanuary 1 to December 31, 2015	Wages, commissions, bonuses, tips Operating a business	\$19696.00	Wages, commissions, bonuses, tips Operating a business	
		or the calendar year before that: lanuary 1 to December 31, 2014	Wages, commissions, bonuses, tips Operating a business	\$10431.00	Wages, commissions, bonuses, tips Operating a business	
 	nclu bene case	you receive any other income during de income regardless of whether that income; in and you have income that you received each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples nterest; dividends; money o together, list it only once un	of other income are alimony; of ollected from lawsuits; royalties der Debtor 1.	s; and gambling and lottery win	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
		From January 1 of current year until	Estimated Income	\$1,260.00		
		he date you filed for bankruptcy:	unemployment	\$2,000.00		
		For last calendar year: January 1 to December 31, 2015 YYYYY	Estimated Income	\$1,680.00		
		For the calendar year before that: January 1 to December 31, 2014 YYYYY	Estimated Income	\$1,680.00		

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by an individual
as this payment
Mortgage Car
Credit card
Loan repayme
Suppliers or
vendors
Other
Mortgage
Car Credit card
Loan repayme
Suppliers or
vendors
Other
Mortgage
Car
Credit card
Loan repayme
Suppliers or
vendors

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ebtor 1	Dominique			Gı	raves	Case number (if known)
	First Name		Middle Name	La	st Name		
Insid corp ager	lers include your re orations of which y	latives; any ou are an c a busines	y general partners; officer, director, per s you operate as a	relatives of any son in control, o	r owner of 20% or mo	tnerships of which y are of their voting se	ho was an insider? you are a general partner; curities; and any managing comestic support obligations,
V	No Yes. List all payme	nts to an ir	nsider				
	res. List all payme	ino to air ii	isiaci.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
insid Inclu		bts guaran	teed or cosigned b	y an insider. Dates of	Total amount	Amount you	n account of a debt that benefited an Reason for this payment
				payment	paid	still owe	Include creditor's name
	Insider's Name						
	Number Street						
_	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Oity .	Jiaie	Zip Code				

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Deb	tor 1				Graves	(Case number (if	known)	
		First Name	Middle Name		Last Name				
art	4:	Identify Legal	Actions, Repossess	sions, a	and Foreclosure	es			
	With List a	in 1 year before yo	ou filed for bankruptcy, w	vere you	a party in any laws	uit, court actio			ng? r custody modifications, and
		No Yes. Fill in the detail	s.						
				Nature	of the case	Court or	agency		Status of the case
		Case title							Pending
						Court Nar	ne		On appeal
		Case number							Concluded
						NumberSt	treet		Concluded
						City	State	Zip Code	
		Case title							Pending
						Court Nar	ne		On appeal
		Case number				NumberSt	treet		Concluded
						City	State	Zip Code	
						City	Siale	Zip Code	
		No. Go to line 11. Yes. Fill in the infor	mation below.		Describe the prop	erty		Date	Value of the property
		Creditor's Name							
					Explain what happ	pened			
		Number Street							
					Property was re				
					Property was fo				
		City	State Zip Code		Property was g		or lovied		
		Сіту	State Zip Code	, 	Describe the prop	•	, or levieu.	Date	Value of the
									property
		Creditor's Name						-	
					Explain what happ	pened			
		Number Street							
					Property was re				
				_	Property was fo				
		Cit.	Ctata 71: C 1		Property was g		andards d		
		City	State Zip Code)	Property was a	ttached, seized,	, or levied.		

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Deb	tor 1	Dominique	Graves	Case number (if known)	
		First Name Middle Name	Last Name		
11.		hin 90 days before you filed for bankruptcy, c ounts or refuse to make a payment because y		sk or financial institution, set off any ar	nounts from your
	✓	No Yes. Fill in the details.			
			Describe the action the	creditor took Date actio was taken	n Amount
		Creditor's Name	_		
		Number Street	Last 4 digits of account nur	nber: XXXX-	
		City State Zip Code	_		
12.		hin 1 year before you filed for bankruptcy, wa ointed receiver, a custodian, or another offic		essession of an assignee for the benefi	t of creditors, a court-
	✓	No Yes			
Par	t 5:	List Certain Gifts and Contributions	8		
13.	Wit	thin 2 years before you filed for bankruptcy,	did you give any gifts with a tot	al value of more than \$600 per person?	
		No Yes. Fill in the details for each gift.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift	_		
		Number Street	_		
		City State Zip Code Person's relationship to you			
		Person to Whom You Gave the Gift			
		- CISSITIO WHOTH TOU DAVE THE OILL	_		
		Number Street	_		
		City State Zip Code Person's relationship to you			

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Deb	tor 1	Dominique		Graves	Case number (if known)		
		First Name	Middle Name	Last Name			
14.	Wit	hin 2 years before you	filed for bankruptcy, did	you give any gifts or contributi	ons with a total value of	more than \$600	to any charity?
	V	No					
	Ħ	Yes. Fill in the details for	r each gift or contribution.				
		Gifts or contributions	s to charities	Describe what you contrib	uted	Date you	Value
		that total more than \$	600	·		contributed	
		Charity's Name		•			
				_			
		Number Street					
		City Sta	te Zip Code				
		City Sta	ile Zip Code				
Part	6:	List Certain Losse	es				
15.		nin 1 year before you fi ibling? No Yes. Fill in the details.	led for bankruptcy or sin	ce you filed for bankruptcy, did	l you lose anything becau	use of theft, fire,	other disaster, or
	_	Describe the property how the loss occurre		Describe any insurance co Include the amount that insura pending insurance claims on A/B: Property.	ance has paid. List	Date of your loss	Value of property lost
16.	abo	ut seeking bankruptcy	or preparing a bankrupt	ou or anyone else acting on you cy petition? credit counseling agencies for sen			nyone you consulted
		No					
	✓	Yes. Fill in the details.					
				Description and value of a transferred	ny property	Date payment or transfer was made	Amount of payment
		Semrad Law Firm		Attorney's Fee - 175.00		10/4/2016	\$175.00
		Person Who Was Paid					
		20 South Clark Street 2	8th Floor				
		Number Street					
		-					
			nois 60606				
		City Sta	te Zip Code				
		Email or website addre	SS				
		Person Who Made the	Payment, if Not You				
		Person Who Was Paid					<u> </u>
		Number Street					
		City Sta	te Zip Code				
		Email or website addre	ss				
		Person Who Made the	Payment, if Not You				

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Deb	tor 1	Dominique		Graves	Case number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed by you deal with your credit not include any payment or tr No Yes. Fill in the details.	tors or to make payment		our behalf pay or transfer	any property to any	one who promised to
	ш	res. I ili ili the details.					
				Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		City State	Zip Code				
		ude both outright transfers a sfers that you have already li No Yes. Fill in the details.		urity (such as the granting of a			Do not include gifts and
				Description and value of property transferred		y property or eceived or debts pa	Date transfer was made
		Person Who Received Tra	ınsfer				
		Number Street					
		City State Person's relationship to yo	Zip Code ou				
		Person Who Received Tra	nsfer				
		Number Street					
		City State Person's relationship to yo	Zip Code ou				
19.		hin 10 years before you fil ese are often called asset-pr		ou transfer any property to	a self-settled trust or simi	lar device of which	you are a beneficiary?
	V	No Yes. Fill in the details.					
	Ц	res. Fill in the details.		Description and value o	f the property transferred	d	Date transfer was made
		Name of trust					

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Debtor 1		Graves e Name Last Name	Case number (if know	n)	
Part 8:	1	nts, Instruments, Safe Deposit	Boxes, and Storage I	Jnits	
20. Wit mo Incl	thin 1 year before you filed for banki ved, or transferred?	ruptcy, were any financial accounts or or other financial accounts; certificates of	instruments held in your na	ame, or for your benefit, c	
☑	No Yes. Fill in the details.	Last 4 digits of account	• •	Date	Last balance
		number	instrument	account was closed, sold, moved, or transferred	before closing or transfer
	Person Who Was Paid	XXXX-	Checking Savings		
	Number Street		Money market Brokerage Other		
	City State Zip	Code			
	Person Who Was Paid	XXXX-	Checking Savings		
	Number Street		Money market Brokerage Other		
	City State Zip	Code			
	you now have, or did you have with er valuables? No Yes. Fill in the details.	in 1 year before you filed for bankrupt		other depository for secu	Do you still have it?
	Name of Financial Institution	Name			∏ No
	Number Street	Number Street			Yes
		City State	Zip Code		
	City State Zip C	Code			
22. Hav		unit or place other than your home wit	hin 1 year before you filed f	or bankruptcy?	
	No Yes. Fill in the details.				
		Who else had access to it	? Describe t	he contents	Do you still have it?
	Name of Storage Facility	Name			☐ No
	Number Street	Number Street			Yes
	City State Zip C	City State	Zip Code		
	Oity State ZIP C				

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ebtor 1		(e number (if known)	
	First Name Middle Name	L	ast Name			
rt 9:	Identify Property You Hold or Cont	rol for Som	eone Else			
	you hold or control any property that some	one else owns	? Include any	y property you b	orrowed from, are storing for, or hold i	n trust for
so	meone.					
V	l No					
È	Yes. Fill in the details.					
_	103. Till ill tile details.	\A/I	l		Describe the contents	Value
		wnere is t	he property?		Describe the contents	Value
	Owner's Name	No seek on Oto				
	Owners Name	Number Str	eet			
	Number Street					
	Namber Street					
	·	City	State	Zip Code		
		City	Siale	Zip Code		
	City State Zip Code					
	=					
art 10:	Give Details About Environmental	Information	n			
or the	purpose of Part 10, the following definitions apply	<i>y</i> :				
		•				
	Environmental law means any federal, state, or lo		Ü	•	•	
	hazardous or toxic substances, wastes, or materi	•				
	including statutes or regulations controlling the c	leanup of these	substances, v	vastes, or materia	āl.	
•	Site means any location, facility, or property as de	fined under any	environmental	law, whether you	now own, operate, or utilize it	
	or used to own, operate, or utilize it, including dis	sposal sites.				
	Hazardous material means anything an environm	ental law define	s as a hazardo	nus waste hazard	ous substance	
•	Hazardous material means anything an environm toxic substance, hazardous material, pollutant, co			ous waste, hazard	ous substance,	
•	toxic substance, hazardous material, pollutant, co	ontaminant, or s	imilar term.		ous substance,	
•	· · · · · · · · · · · · · · · · · · ·	ontaminant, or s	imilar term.		ous substance,	
•	toxic substance, hazardous material, pollutant, co	ontaminant, or s	imilar term.		ous substance,	
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn	ontaminant, or s	imilar term. rdless of when	they occurred.		,
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo	ontaminant, or s	imilar term. rdless of when	they occurred.		,
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No	ontaminant, or s	imilar term. rdless of when	they occurred.		
eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that yo	ontaminant, or s	imilar term. rdless of when	they occurred.		
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No	ontaminant, or s	imilar term. rdless of when le or potentia	they occurred.		Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No	ontaminant, or s now about, regal	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No Yes. Fill in the details.	ontaminant, or s now about, regal ou may be liabl Governme	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No	ontaminant, or s now about, regal	imilar term. rdless of when le or potentia	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a hard proceedings that you have a hard proceeding th	contaminant, or so now about, regarded to may be liable Governmen	rdless of when le or potential unit	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, co all notices, releases, and proceedings that you kn as any governmental unit notified you that you No Yes. Fill in the details.	ontaminant, or s now about, regal ou may be liabl Governme	rdless of when le or potential unit	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a hard proceedings that you have a hard proceeding th	Governmen Number Streen	cimilar term. rdless of when the or potentia tental unit tental u	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a hard proceedings that you have a hard proceeding th	contaminant, or so now about, regarded to may be liable Governmen	rdless of when le or potential unit	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a substantial hardward has any governmental unit notified you that you have any governmental unit notified you have any g	Governmen Number Streen	cimilar term. rdless of when the or potentia tental unit tental u	they occurred.	or in violation of an environmental law?	Date of
■ eport	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a hard proceedings that you have a hard proceeding th	Governmen Number Streen	cimilar term. rdless of when the or potentia tental unit tental u	they occurred.	or in violation of an environmental law?	Date of
eport Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have a substantial hardward has any governmental unit notified you that you have any governmental unit notified you have any g	Governmen Governmen Number Street	rdless of when the or potential unit the et	they occurred.	or in violation of an environmental law?	Date of
eport Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have have been been been been been been been be	Governmen Governmen Number Street	rdless of when the or potential unit the et	they occurred.	or in violation of an environmental law?	Date of
eport Ha	toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit	Governmen Governmen Number Street	rdless of when the or potential unit the et	they occurred.	or in violation of an environmental law?	Date of
eport Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have have been been been been been been been be	Governmen Governmen Number Street	rdless of when the or potential unit the et	they occurred.	or in violation of an environmental law?	Date of
eport Ha	toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit	Governmen Governmen Number Street	cimilar term. rdless of when the or potential ental unit the eet State	they occurred.	or in violation of an environmental law?	Date of
eport Ha	toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit	Government Government Number Stro City	cimilar term. rdless of when the or potential ental unit the eet State	they occurred.	Environmental law, if you know it	Date of notice
eport Ha	toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit	Government Government Number Stro City	cimilar term. rdless of when the or potential ental unit the eet State	they occurred.	Environmental law, if you know it	Date of notice
eport Ha	toxic substance, hazardous material, pollutant, corall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any notified any notified any governmental unit	Government Government Number Stro City	ental unit State State State State State State State	they occurred.	Environmental law, if you know it	Date of notice
eport Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmen Governmen Governmen Governmen Governmen Governmen Governmen Governmen	ental unit State	they occurred.	Environmental law, if you know it	Date of notice
eport Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have as any governmental unit notified you that you have. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any have you have you notified any governmental unit of any have you have you have you notified any governmental unit of any have you have you have you notified any governmental unit of any have you have you have you have you have you notified any governmental unit of any have you ha	Government	ental unit State	they occurred.	Environmental law, if you know it	Date of notice
eport Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmen Governmen Governmen Governmen Governmen Governmen Governmen Governmen	ental unit State	they occurred.	Environmental law, if you know it	Date of notice
eport Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmen Governmen Governmen Governmen Governmen Governmen Governmen Governmen	ental unit State	they occurred.	Environmental law, if you know it	Date of notice
eport Ha	toxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know as any governmental unit notified you that you have a substance of site. No Yes. Fill in the details. Name of site Number Street City State Zip Code ave you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmen Governmen Governmen Governmen Governmen Number Stro Governmen Governmen Number Stro Governmen	rdless of when rdless of when rdless of when rental unit retal uni	zip Code	Environmental law, if you know it	Date of notice

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Deb	otor 1	Dominique			Graves	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	y in any judici	al or administra	tive proceeding under	any environmenta	al law? Include settlements and orders	S.
	✓	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the case
		Case title						_
					Court Name			Pending
					Number Street			On appeal
		Case number			Number Street			Concluded
				•	City State	Zip Code		
Part	t 11:	Give Details A	bout Your	Business or	Connections to An	y Business		
27.	Witl	nin 4 years before	you filed for I	oankruptcy, did	you own a business or	have any of the fo	ollowing connections to any business	?
		A sole proprie	tor or self-empl	loyed in a trade, p	orofession, or other activit	y, either full-time oi	r part-time	
		A member of a	a limited liability	company (LLC)	or limited liability partners	ship (LLP)		
		A partner in a	partnership					
		An officer, dire	ctor, or manag	ing executive of	a corporation			
		An owner of a	t least 5% of th	e voting or equity	securities of a corporatio	n		
		No. None of the abo	ove applies Go	to Part 12				
	H				s below for each business			
		res. Oricon an trial	apply above al	ia iii iii iii c detaiic	Describe the natu		s Employer Identification n	umber Do not
					Describe the nate	ire of the busines	include Social Security nu	
						EIN:		
		Business Name						
		Number Street		_		Dates business existed		
		Number Officer			Name of account	ant or bookkeepe	er	
		City	State	Zip Code			From To	
					D		- Fundamental and Grand and	
					Describe the natu	ire of the busines	Employer Identification n include Social Security nu	
					_		EIN:	
		Business Name						
		Number Street					Dates business existed	
					Name of account	ant or bookkeepe		
		City	State	Zip Code			From To	
					Describe the net	us of the business	Employer Identification n	umber De net
					Describe the natu	ire of the busines	Employer Identification n include Social Security nu	
					_		EIN:	
		Business Name						
		Number Street			- Name of		Dates business existed	
					Name of account	ant or bookkeepe		
		City	State	Zip Code			From To	

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Debtor	1 Dominique		Graves	Case number (if known)					
	First Name	Middle Name	Last Name						
	8. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
∠	No Yes. Fill in the details below	DW.							
			Date issued						
	Name		MM/DD/YYYY						
	Number Street		_						
	City Sta	ate Zip Code	_						
Part 12	Sign Below								
tru	I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.								
	/s/ Domir	nique Graves	3	×					
	Signature of			Signature of Debtor 2					
	Date 10/4/2	2016		Date					
Did	l you attach additional pa	ges to Your Statement of	Financial Affairs for Individu	uals Filing for Bankruptcy (Official Form 107)?					
✓	No								
	Yes								
Did	you pay or agree to pay	someone who is not an at	torney to help you fill out bar	nkruptcy forms?					
✓	No								
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

A.G.

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- 3. Before signing this agreement, the attorney has received, \$175.00 toward the flat fee, leaving a balance due of \$3,825.00; and \$61.76 for expenses, leaving a balance due of \$4,196.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	10/4/2016	
Signed:		
/s/ Don	ninique Graves Dominghe Graves	· In a
	(/s/ Angie Harb
Debtor((s)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case 4 and other expenses of \$371.76

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- 3. Before signing this agreement, the attorney has received, \$175.00 toward the flat fee, leaving a balance due of \$3,825.00; and \$61.76 for expenses, leaving a balance due of \$4,196.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Debtor((s)	Attorney for Debtor(s)	
		/s/ Angie Harb	
/s/ Dom	ninique Graves		
Signed:			
Date:	10/4/2016		

Do not sign if the fee amounts at top of this page are blank.

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

	Nort	nern District of Illinois	
n re	Dominique Graves	Case No.	
	Debtor		(If known)
		Chapter	Chapter 13
	DISCLOSURE OF COMPE	NSATION OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. that compensation paid to me within one year be services rendered or to be rendered on behalf o is as follows:	efore the filing of the petition in bankruptcy, or a	greed to be paid to me, for
	For legal services, I have agreed to accept		\$4,000.0
	Prior to the filing of this statement I have receive	ved	\$175.0
	Balance Due		\$3,825.0
2.	. The source of the compensation paid to me was	:	
	✓ Debtor	Other (specify)	
3.	. The source of the compensation paid to me is:		
	✓ Debtor	Other (specify)	
4.	I have not agreed to share the above-disclo members and associates of my law firm.	sed compensation with any other person unless	they are
		compensation with a other person or persons whopy of the agreement, together with a list of the attached.	
5.	 In return for the above-disclosed fee, I have agr a. Analysis of the debtor's financial situation bankruptcy; 	reed to render legal service for all aspects of the n, and rendering advice to the debtor in determin	
	b. Preparation and filing of any petition, sch	nedules, statements of affairs and plan which ma	ay be required;
	c. Representation of the debtor at the meet	ing of creditors and confirmation hearing, and ar	ny adjourned hearings thereof
	d. Representation of the debtor in adversar	y proceedings and other contested bankruptcy r	matters;
6.	. By agreement with the debtor(s), the above-disc	closed fee does not include the following service	s:
		CERTIFICATION	
	I certify that the foregoing is a complete statement he debtor(s) in this bankruptcy proceedings.	nt of any agreement or arrangement for paymer	nt to me for representation
	10/4/2016	/s/ Angie Harb	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Graves, Dominique	Case No.	Case No.					
	Debtor(s)	Cuse IV.						
		Chapter. Ch	apter13					
	VERIFICATION OF CREDITOR MATRIX							
	The above named Debtors hereby verify that	at the attached list of creditors is true and correct	to the best of their knowledge.					
Date:	10/4/2016	/s/ Graves, Dominique						
		Graves, Dominique						
		Signature of Debtor						

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508 USA

ALLNCE COL Po Box 1267 Marshfield , WI 54449 USA

DEPT OF EDUCATION/NELN 121 S 13TH ST LINCOLN , NE 68508 USA

CREDIT ACCEPTANCE PO BOX 513 Southfield , MI 48037 USA

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON , WA 98057 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

CAPITAL ONE BANK USA N PO Box 71083 c/o Ashley Boswell Charlotte , NC 28272 USA

COMNWLTH FIN 960 N MAIN STREET SCRANTON , PA 18508 USA

WEBBNK/FHUT 6250 RIDGEWOOD ROA SAINT CLOUD , MN 56303 USA

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604 USA

Department of Unemployment 4519 W Main Street

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Belleville , IL 62226 USA

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Debtor 1 Dominique		Graves	_ Case number (if known)	
First Name Part G: Answer These Q	Middle Name uestions for Reporting Pui	Last Name		
16. What kind of debts do you have?	16a. Are your debts prim 101(8) as "incurred b No. Go to line 16b Yes, Go to line 17	rarily consumer debts? y an individual primarily o. 7. arily business debts? usiness or investment or o.	for a personal, family Business debts are de through the operation	or household purpose." ebts that you incurred to of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be a		any exempt property is exclured creditors?	ided and administrative expenses are
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,00	Some] 25,001-50,000] 50,001-100,000] More than 100,000
19. How much do you estimate your assets to be worth?	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	NAME OF THE PARTY	100-0	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001 \$50,000,001 \$100,000,000	-\$50 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 74 Sign Below	ntifective Continue to an interpretation of the Control of the Con			
For you	and correct. If I have chosen to file under 11,12, or 13 of title 11, Unit choose to proceed under Cl. If no attorney represents me fill out this document, I request relief in accordance I understand making a false connection with a bankrupte years, or both. 18 U.S.C. § 1st Dominique Graves Signature of Debtor 1	er Chapter 7, I am aware ed States Code. I unders hapter 7. ee and I did not pay or aghave obtained and read ce with the chapter of title statement, concealing pays case can result in fine \$ 152, 1341, 1519, and 3 comunity.	e that I may proceed, stand the relief available gree to pay someone of the notice required by the 11, United States Coroperty, or obtaining as up to \$250,000, or in Signature of Debto	who is not an attorney to help vill 1. 11 U.S.C. § 342(b). ode, specified in this petition. money or property by fraud in imprisonment for up to 20
SONANGE MASSAGARA POPULAT GOA DO ANANGE AND AND AND ANA	Executed on 10/4/201 MM /	16 DD / YYYY	Executed on _	MM / DD / YYYY

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Fill in this informa	ion to identify your cast	9			
Debtor 1	Dominique		Graves		
F	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	-	
United States Ban	kruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case number (If known)	******	· · · · · · · · · · · · · · · · · · ·			
	orm 106De	_	***************************************		Check if this is ar amended filing
Declaration	on About ar	<u>ı Individual D</u>	ebtor's Sche	dules	12/15
If two married peo	ple are filing togethe	r, both are equally respon	nsible for supplying corre	ect information.	
Panek Sign B		one who is NOT an attorn	rey to help you fill out ban	kruptcy forms?	etookalainyttesiä puoven suomaa sensuksia elektrista tääkä, kunsek
☑ No			, ,		
Yes. Nar	ne of person		Attach Bankruptcy Signature (Official	Petition Preparer's Notice, Declaration, and Form 119).	
Is/ Dominique Signature of D	true and correct. re Graves Doynia ebtor 1	"å	_	with this declaration and e of Debtor 2	
Date 10/4/201 MM/DD			Date	M/DD/YYYY	
14441/00	f = 2 4 b			NAIDA A A A CONTRACTOR	

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Debtor 1			Graves	Case number (if known)			
	First Name	Middle Name	Last Name				
28. Wil cre	thin 2 years before you ditors, or other parties.	filed for bankruptcy, did y	you give a financial statem	ent to anyone about your business? Include all financial institution	วกร,		
Z	No Yes. Fill in the details be	low.					
			Date issued				
	Name		MM/DD/YYYY	_			
	Number Street						
	City S	late Zip Code	Marko.				
art 12:	Sign Below						
true	and correct. I understar ruptcy case can result i	nd that making a false sta	atement, concealing prope	ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
	Signature of		t to the second	Signature of Debtor 2			
	Date 10/4/2	2016		Date			
Did y	you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?						
Montana	No						
The same of	⁄es						
Did y	ou pay or agree to pay	someone who is not an a	ttomey to help you fill out	bankruptcy forms?			
Z	No						
	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice,			
				Declaration, and Signature (Official Form 119).			

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Graves, Dominique Debtor(s)	Case No.							
		Chapter. Chapter13							
	VERIFICATION OF CREDITOR MATRIX								
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge								
Date:	10/4/2016	Ist Graves, Dominique Dominique Khang Graves, Dominique Signature of Debtor							

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Debt	or 1	Dominique First Name	Middle Name	Graves Last Name	Case number (if known)			
16.	Cal	culate the median far	nily income that applies to y		os:			
		. Fill in the state in whi		Illinois				
			people in your household.	2	_			
		c. Fill in the median family income for your state and size of household						
		To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.						
17.	Hov	w do the lines compa	re?					
	17a.	17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2).						
	17b.	1325(b)(3). Go t	than line 16c. On the top of pago o Part 3 and fill out Calculat thly income from line 14 above.	ge 1 of this form, chec ion of Disposable I	k box 2, Disposable income is determined under 11 U.S.C. § ncome (Official Form 122C-2). On line 39 of that form, copy			
Part	3	Calculate Your Co	ommitment Period Und	er 11 U.S.C. §13	325(b)(4)			
18.	Cop	y your total average	monthly income from line 11	•		\$1,708.20		
19.	Ded com	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.						
	19a.	If the marital adjustme	ent does not apply, fill in 0 on lin	e 19a.		-\$0.00		
	19b.	Subtract line 19a fro	om line 18.			\$1,708.20		
20.	Calc	culate your current m	onthly income for the year. F	follow these steps:				
	20a.	Copy line 19b.				\$1,708.20		
		Multiply by 12 (the nur	mber of months in a year).			x 12		
	20b.	The result is your curr	ent monthly income for the yea	r for this part of the fo	rm.	\$20,498.40		
	20c.	Oc. Copy the median family income for your state and size of household from line 16c.						
21.	How	ow do the lines compare?						
	Z	Line 20b is less than lin period is 3 years. Go to	e 20c. Unless otherwise ordere Part 4.	ed by the court, on the	top of page 1 of this form, check box 3, The commitment			
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4.							
Part 4	g S	Sign Below						
		By signing here, I decla	are under penalty of perjury that	the information on th	is statement and in any attachments is true and correct.			
* /s/ Dominique Graves Aministra Alagara *								
		Signature of Debte	Comment of the property of the second	lans ·	Signature of Debtor 2			
		Date 10/4/2016	•		Date			
		MM/DD/YY	Ϋ́Υ		MM/DD/YYYY			
If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.								